

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

West Virginia Republican Party, Inc.

ADDRESS (number and street)

5019 MacCorkle Avenue SW

Check if different  
than previously  
reported. (ACC)

South Charleston

WV

25309

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00417063

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2009

through

07

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mary V. Riggall

Signature of Treasurer

Electronically Filed by Mary V. Riggall

Date

08

20

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 54

Write or Type Committee Name  
West Virginia Republican Party, Inc.

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	18880.78
(b) Cash on Hand at Beginning of Reporting Period .....	13928.32	
(c) Total Receipts (from Line 19) .....	13692.42	103757.83
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	27620.74	122638.61
7. Total Disbursements (from Line 31) .....	19745.75	114763.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	7874.99	7874.99
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	39927.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	W	Y
0	7	3	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	8882.42	62514.22
(ii) Unitemized .....	3660.00	33241.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12542.42	95755.83
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1150.00	7202.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	13692.42	102957.83
12. Transfers From Affiliated/Other Party Committees .....	0.00	800.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	13692.42	103757.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13692.42	103757.83

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	19745.75	114763.62	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	19745.75	114763.62	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19745.75	114763.62	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19745.75	114763.62	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	13692.42	102957.83
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13692.42	102957.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19745.75	114763.62
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19745.75	114763.62

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Robert Allen

Mailing Address 246 Ridgeway Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.15586

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Janice Kathy Baliker

Mailing Address 1126 Blue Horizon Drive

City

Morgantown

State

WV

Zip Code

26501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Business owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.15580

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Lee A. Bias

Mailing Address 238 Bartow Drive

City

Barboursville

State

WV

Zip Code

25504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cabell Huntington Hospital

Occupation  
Certified Registered Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.15768

Amount of Each Receipt this Period

100.00

Underwood Summit and Institute donation

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Lee A. Bias

Mailing Address 238 Bartow Drive

City

Barboursville

State

WV

Zip Code

25504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cabell Huntington Hospital

Occupation

Certified Registered Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	9	

Transaction ID: SA11AI.15800

Amount of Each Receipt this Period

25.00

Underwood Summit

**B.**

Full Name (Last, First, Middle Initial)

Lee A. Bias

Mailing Address 238 Bartow Drive

City

Barboursville

State

WV

Zip Code

25504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cabell Huntington Hospital

Occupation

Certified Registered Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	9	

Transaction ID: SA11AI.15801

Amount of Each Receipt this Period

25.00

Underwood Summit

**C.**

Full Name (Last, First, Middle Initial)

Craig Blair

Mailing Address 47 Wasser Drive

City

Martinsburg

State

WV

Zip Code

25401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of WV

Occupation

Delegate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	9	

Transaction ID: SA11AI.15712

Amount of Each Receipt this Period

25.00

intern pig roast

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Walter Duke

Mailing Address 112 Tavern Rd

City

Matinsburg

State

WV

Zip Code

25401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	9

Transaction ID: SA11AI.15699

Amount of Each Receipt this Period

40.00

intern pig roast

**B.**

Full Name (Last, First, Middle Initial)

Sidney E. Grisell

Mailing Address 505 Wheeling

City

Glen Dale

State

WV

Zip Code

26038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	9

Transaction ID: SA11AI.15620

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Eleanor W. Herkness

Mailing Address P.O. Box 511

City

Lewisburg

State

WV

Zip Code

24901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
noneOccupation  
housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	9

Transaction ID: SA11AI.15589

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional) .....

1640.00

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Gary G. Howell

Mailing Address P.O. Box 39

City

State

Zip Code

Keyser

WV

26726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
business owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	9

Transaction ID: SA11AI.15758

Amount of Each Receipt this Period

25.00

Underwood Summit

**B.**

Full Name (Last, First, Middle Initial)

Betty Ireland

Mailing Address 948 Ridgemont Rd

City

State

Zip Code

Charleston

WV

25314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of West VirginiaOccupation  
Secretary of State

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	2	/	2	0	0	9

Transaction ID: SA11AI.15861

Amount of Each Receipt this Period

550.00

In-kind - Underwood intern  
payment to Embassy Suites  
for Summit venue and costs**C.**

Full Name (Last, First, Middle Initial)

Joseph Long

Mailing Address 85 Flat Top Lake Rd

City

State

Zip Code

Ghent

WV

25843

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	1	/	2	0	0	9

Transaction ID: SA11AI.15581

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1075.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Catherine McKinney

Mailing Address 636 Rivendell Dr

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.15613

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5691.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.15840

Amount of Each Receipt this Period

145.50

In-kind - mileage Greenbr-  
ier County Tea Party/Conf-  
erence Senate Candidate

**C.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5725.93

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.15842

Amount of Each Receipt this Period

33.95

In-kind - mileage Morgant-  
own PEIA Hearings

**SUBTOTAL** of Receipts This Page (optional) .....

229.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical CenterOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5842.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.15844

Amount of Each Receipt this Period

116.40

In-kind - mileage Charles-  
ton Steering Committee Me-  
eting

B.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical CenterOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5872.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.15856

Amount of Each Receipt this Period

30.00

In-kind - Charleston Stee-  
ring Committee staff lunch

C.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical CenterOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5947.33

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.15686

Amount of Each Receipt this Period

75.00

intern pig roast

SUBTOTAL of Receipts This Page (optional) .....

221.40

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6073.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.15846

Amount of Each Receipt this Period

126.10

In-kind - mileage Charles-  
ton Underwood Interns' Pig  
Roast

**B.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6123.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.15725

Amount of Each Receipt this Period

50.00

intern pig roast

**C.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6131.19

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 6 / 2 0 0 9

Transaction ID: SA11AI.15848

Amount of Each Receipt this Period

7.76

In-kind - mileage Harrison  
County TARS meeting

**SUBTOTAL** of Receipts This Page (optional) .....

183.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6286.39

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.15850

Amount of Each Receipt this Period

155.20

In-kind - mileage Lewisbu-  
rg - Reception Congressio-  
nal Leadership

**B.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6321.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.15852

Amount of Each Receipt this Period

34.92

In-kind - mileage Mononga-  
lia County Young Republic-  
ans' meeting

**C.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical Center

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6563.81

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.15854

Amount of Each Receipt this Period

242.50

In-kind - mileage Washing-  
ton, D.C. Executive Direc-  
tor Candidate Interview

**SUBTOTAL** of Receipts This Page (optional) .....

432.62

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 54

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VA Medical CenterOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6593.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	5	/	2	0	0	9

Transaction ID: SA11AI.15858

Amount of Each Receipt this Period

30.09

In-kind - Washington, D.C.  
Executive Director Candid-  
ate Interview Breakfast**B.**

Full Name (Last, First, Middle Initial)

Rick Modesitt

Mailing Address PO Box 2206

City

Parkersburg

State

WV

Zip Code

26102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wood CountyOccupation  
Commissioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.15673

Amount of Each Receipt this Period

25.00

intern program

**C.**

Full Name (Last, First, Middle Initial)

Romey L Nelson

Mailing Address 6980 Lick Creek Rd

City

Danville

State

WV

Zip Code

25053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	7	/	2	0	0	9

Transaction ID: SA11AI.15585

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

155.09

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Tom O'Neill

Mailing Address Post Office Box 1006

City

Buckhannon

State

WV

Zip Code

26201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stephoe-Johnson

Occupation  
lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.15782

Amount of Each Receipt this Period

300.00

Underwood Institute donat-  
ion

**B.**

Full Name (Last, First, Middle Initial)

Maxine G. Olson

Mailing Address P.O. Box 665

City

Jane Lew

State

WV

Zip Code

26378

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.15619

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Rocky Peck

Mailing Address 94 Spider Ridge Road

City

Parkersburg

State

WV

Zip Code

26104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rhodes Trailers

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.15776

Amount of Each Receipt this Period

25.00

Underwood Summit

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Melody L. Potter

Mailing Address 105 Newcomer Road

City

South Charleston

State

WV

Zip Code

25309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tri-Star Coal

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.15616

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Melody L. Potter

Mailing Address 105 Newcomer Road

City

South Charleston

State

WV

Zip Code

25309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tri-Star Coal

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.15743

Amount of Each Receipt this Period

25.00

Underwood Summit

**C.**

Full Name (Last, First, Middle Initial)

James W. Reed

Mailing Address 1314 Virginia Street, East

City

Charleston

State

WV

Zip Code

25301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Reed Brothers

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.15603

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Lewis H. Rexroad

Mailing Address 87 Gihon Meadows Dr  
Apt 126

City State Zip Code  
Parkersburg WV 26101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 13 / 2009

Transaction ID: SA11AI.15611

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Lewis H. Rexroad

Mailing Address 87 Gihon Meadows Dr  
Apt 126

City State Zip Code  
Parkersburg WV 26101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2009

Transaction ID: SA11AI.15795

Amount of Each Receipt this Period

25.00

Underwood Summit

**C.**

Full Name (Last, First, Middle Initial)

Lewis H. Rexroad

Mailing Address 87 Gihon Meadows Dr  
Apt 126

City State Zip Code  
Parkersburg WV 26101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
retired

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1030.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2009

Transaction ID: SA11AI.15590

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

John P. Russell

Mailing Address P.O. Box 117

City

Mill Creek

State

WV

Zip Code

26280-0117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.15587

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Rosanne Shupe

Mailing Address PO Box 279

City

Maxwelton

State

WV

Zip Code

24957

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.15617

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Gregory M. Smith

Mailing Address 600 55th Street

City

Vienna

State

WV

Zip Code

26105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.15573

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Gregory M. Smith

Mailing Address 600 55th Street

City

Vienna

State

WV

Zip Code

26105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.15799

Amount of Each Receipt this Period

25.00

Underwood Summit

**B.**

Full Name (Last, First, Middle Initial)

Jackson L. Smith

Mailing Address P.O. Box 457

City

Lost Creek

State

WV

Zip Code

26385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

Jackson Enterprise

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.15618

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ronald B. Snyder

Mailing Address Box 128, 647 East Washington St.

City

Lewisburg

State

WV

Zip Code

24901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RBS, Inc.

Occupation

President , RBS, Inc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.15600

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

William B Snyder

Mailing Address PO Box 829

City

Lewisburg

State

WV

Zip Code

24901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RBS Inc

Occupation

Vice President Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2009

Transaction ID: SA11AI.15601

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Lynn Staton

Mailing Address 368 Jaguar Drive

City

Inwood

State

WV

Zip Code

25428

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2009

Transaction ID: SA11AI.15582

Amount of Each Receipt this Period

120.00

**C.**

Full Name (Last, First, Middle Initial)

David C Sypolt

Mailing Address Post Office Box 5

City

Kingwood

State

WV

Zip Code

26537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
state of WV

Occupation

senator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2009

Transaction ID: SA11AI.15780

Amount of Each Receipt this Period

100.00

Underwood Summit

**SUBTOTAL** of Receipts This Page (optional) .....

720.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 54

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

D. Stephen Walker

Mailing Address 1410 Connell Rd.

City

Charleston

State

WV

Zip Code

25314-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walker Machinery

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.15591

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Theresa Waxman

Mailing Address RT 1 Box 352

City

Clarksburg

State

WV

Zip Code

26301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.15597

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Henry K. Willard

Mailing Address PO Box 3269

City

Sheperdstown

State

WV

Zip Code

25443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.15588

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

8882.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 54

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Armstead for House

Mailing Address 5012 Elk River Road South

City

Elkview

State

WV

Zip Code

25071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 9

Transaction ID: SA11C.15676

Amount of Each Receipt this Period

250.00

intern program

**B.**

Full Name (Last, First, Middle Initial)

Committee to Elect Bill Anderson

Mailing Address 1011 Highland Avenue

City

Williamstown

State

WV

Zip Code

26187

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 0 9

Transaction ID: SA11C.15692

Amount of Each Receipt this Period

200.00

intern pig roast

**C.**

Full Name (Last, First, Middle Initial)

Committee to Elect Larry Border

Mailing Address 39 Highland Meadows Drive

City

Davisville

State

WV

Zip Code

26142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 0 9

Transaction ID: SA11C.15696

Amount of Each Receipt this Period

100.00

intern pig roast

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 54

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Cowles for Delegate

Mailing Address 270 S. Washington St

City

Berkeley Springs

State

WV

Zip Code

25411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2009

Transaction ID: SA11C.15576

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Harrison County Republican Club

Mailing Address 223 Gordon Street

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 27 / 2009

Transaction ID: SA11C.15772

Amount of Each Receipt this Period

100.00

Underwood Summit

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

1150.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Ben Adams

Mailing Address 2714 Fabird Road

City  
Charleston

State  
WV

Zip Code  
25302

Purpose of Disbursement  
office expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

38.14

B.

Full Name (Last, First, Middle Initial)

Ben Adams

Mailing Address 2714 Fabird Road

City  
Charleston

State  
WV

Zip Code  
25302

Purpose of Disbursement  
Underwood intern stipend

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15824

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Appalachian Electric Power

Mailing Address PO Box 24413

City  
Canton

State  
OH

Zip Code  
44701

Purpose of Disbursement  
HQ - power bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15631

Date of Disbursement

/   /

Amount of Each Disbursement this Period

152.97

**SUBTOTAL** of Disbursements This Page (optional) .....

441.11

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Aristotle International

Mailing Address 205 Pennsylvania Ave

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
credit card fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15646

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.60

**B.**

Full Name (Last, First, Middle Initial)

Aristotle International

Mailing Address 205 Pennsylvania Ave

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
credit card fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15647

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24.45

**C.**

Full Name (Last, First, Middle Initial)

Aristotle International

Mailing Address 205 Pennsylvania Ave

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
credit card fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15648

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2.75

**SUBTOTAL** of Disbursements This Page (optional) .....

52.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Aristotle International	<b>Transaction ID:</b> SB21B.15649 <b>Date of Disbursement</b>
Mailing Address 205 Pennsylvania Ave	<div> <div>07</div> <div>27</div> <div>2009</div> </div>
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement credit card fees Candidate Name	<div>16.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Chase, JPMorgan Chase Bank, N.A.	<b>Transaction ID:</b> SB21B.15838 <b>Date of Disbursement</b>
Mailing Address P.O. Box 260180	<div> <div>07</div> <div>31</div> <div>2009</div> </div>
City Baton Rouge State LA Zip Code 78026-0180	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement banking service fee - fed 2 account Candidate Name	<div>2.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Chase, JPMorgan Chase Bank, N.A.	<b>Transaction ID:</b> SB21B.15839 <b>Date of Disbursement</b>
Mailing Address P.O. Box 260180	<div> <div>07</div> <div>31</div> <div>2009</div> </div>
City Baton Rouge State LA Zip Code 78026-0180	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement banking service fee - Victory account Candidate Name	<div>2.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**20.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Erie Insurance	<b>Transaction ID:</b> SB21B.15633 <b>Date of Disbursement</b>
Mailing Address 100 Erie Insurance Place	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 0 / 2 0 0 9</div> </div>
City Erie State PA Zip Code 16530	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement HQ - renter's insurance 3rd quarter	<div>344.87</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Erie Insurance	<b>Transaction ID:</b> SB21B.15634 <b>Date of Disbursement</b>
Mailing Address 100 Erie Insurance Place	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 0 / 2 0 0 9</div> </div>
City Erie State PA Zip Code 16530	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement State workers' comp insurance - 3rd quarter	<div>142.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Fibernet	<b>Transaction ID:</b> SB21B.15640 <b>Date of Disbursement</b>
Mailing Address P.O. Box 11171	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 9</div> </div>
City Charleston State WV Zip Code 25339	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement HQ - phone services	<div>242.01</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**728.88**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 54

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Patrick Heavner

Mailing Address 60 Windsor Drive

City Mineral Wells State WV Zip Code 26150

Purpose of Disbursement  
Underwood intern stipend

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15820

Date of Disbursement

/   /

Amount of Each Disbursement this Period

57.52

**B.**

Full Name (Last, First, Middle Initial)

Patrick Heavner

Mailing Address 60 Windsor Drive

City Mineral Wells State WV Zip Code 26150

Purpose of Disbursement  
Underwood intern stipend

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15828

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Holiday Inn Martinsburg

Mailing Address 301 Foxcroft Avenue

City Martinsburg State WV Zip Code 25401

Purpose of Disbursement  
late lunches for SEC meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.44

**SUBTOTAL** of Disbursements This Page (optional) .....

598.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 54

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Betty Ireland

Mailing Address 948 Ridgemont Rd

City  
Charleston

State  
WV

Zip Code  
25314

Purpose of Disbursement

In-kind - Underwood intern payment to Embassy Suites for Summit venue and costs

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15862

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)

Donnie Knight

Mailing Address Post Office Box 724

City  
Peterstown

State  
WV

Zip Code  
24693

Purpose of Disbursement

Steele event 09 - music group

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15637

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

Micalyn Kuhl

Mailing Address 2 Chilton Manor Apartment D

City  
Charleston

State  
WV

Zip Code  
25314

Purpose of Disbursement

Underwood intern stipend

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15826

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - mileage Greenbrier County Tea Party/Conference Senate Candidate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15841

Date of Disbursement

07 / 04 / 2009

Amount of Each Disbursement this Period

145.50

B.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - mileage Morgantown PEIA Hearings

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15843

Date of Disbursement

07 / 06 / 2009

Amount of Each Disbursement this Period

33.95

C.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - mileage Charleston Steering Committee Meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15845

Date of Disbursement

07 / 11 / 2009

Amount of Each Disbursement this Period

116.40

SUBTOTAL of Disbursements This Page (optional) .....

295.85

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - Charleston Steering Committee staff lunch

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15857

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - mileage Charleston Underwood Interns' Pig Roast

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

126.10

C.

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - mileage Harrison County TARS meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15849

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7.76

SUBTOTAL of Disbursements This Page (optional) .....

163.86

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Doug McKinney

**Transaction ID:** SB21B.15851

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	0	9

Mailing Address 636 Rivendell Drive

Amount of Each Disbursement this Period

155.20
--------

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement  
In-kind - mileage Lewisburg - Reception Congressional Leadership

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

Doug McKinney

**Transaction ID:** SB21B.15853

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	0	9

Mailing Address 636 Rivendell Drive

Amount of Each Disbursement this Period

34.92
-------

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement  
In-kind - mileage Monongalia County Young Republicans' meeting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

Doug McKinney

**Transaction ID:** SB21B.15855

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	9

Mailing Address 636 Rivendell Drive

Amount of Each Disbursement this Period

242.50
--------

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement  
In-kind - mileage Washington, D.C. Executive Director Candidate Interview

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....**432.62****TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Doug McKinney

Mailing Address 636 Rivendell Drive

City  
Bridgeport

State  
WV

Zip Code  
26330

Purpose of Disbursement

In-kind - Washington, D.C. Executive Director Candidate Interview Breakfast

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15859

Date of Disbursement

07 / 25 / 2009

Amount of Each Disbursement this Period

30.09

**B.**

Full Name (Last, First, Middle Initial)

Mountaineer Gas

Mailing Address PO Box 362

City  
Charleston

State  
WV

Zip Code  
25322

Purpose of Disbursement

HQ - gas bill

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15642

Date of Disbursement

07 / 28 / 2009

Amount of Each Disbursement this Period

25.74

**C.**

Full Name (Last, First, Middle Initial)

Nina Orndorff

Mailing Address 35 South Florida Street

City  
Buckhannon

State  
WV

Zip Code  
26201

Purpose of Disbursement

reimbursable gas expenses - meeting w/Governor Moore, SEC meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15823

Date of Disbursement

07 / 24 / 2009

Amount of Each Disbursement this Period

95.99

**SUBTOTAL** of Disbursements This Page (optional) .....

151.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Nina Orndorff

Mailing Address 35 South Florida Street

City State Zip Code  
Buckhannon WV 26201

Purpose of Disbursement  
Underwood intern stipend

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15827

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Thomas E. Phillips, Jr.

Mailing Address 60 Overlook Drive

City State Zip Code  
Bridgeport WV 26330

Purpose of Disbursement  
website / computer consulting work

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

420.00

C.

Full Name (Last, First, Middle Initial)

Mary V. Riggall

Mailing Address 838 Carroll Road

City State Zip Code  
Charleston WV 25314

Purpose of Disbursement  
employee - office manager

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15625

Date of Disbursement

/   /

Amount of Each Disbursement this Period

950.58

**SUBTOTAL** of Disbursements This Page (optional) .....

1870.58

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Mary V. Riggall

Mailing Address 838 Carroll Road

City  
CharlestonState  
WVZip Code  
25314Purpose of Disbursement  
employee - office manager

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15626

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	9

Amount of Each Disbursement this Period

950.58

**B.**

Full Name (Last, First, Middle Initial)

Kevin S. Robertson

Mailing Address Post Office Box 190

City  
ManState  
WVZip Code  
25635Purpose of Disbursement  
reimbursement - pig roast expense - sheet cake

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15816

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	9

Amount of Each Disbursement this Period

27.43

**C.**

Full Name (Last, First, Middle Initial)

Kevin S. Robertson

Mailing Address Post Office Box 190

City  
ManState  
WVZip Code  
25635Purpose of Disbursement  
Underwood intern stipend

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15825

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1478.01

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Cheryl A. Rust

Mailing Address Rt. 1, Box 375

City  
Buffalo

State  
WV

Zip Code  
25033

Purpose of Disbursement  
employee - staff

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15624

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 10 / 2009

Amount of Each Disbursement this Period

811.98

B.

Full Name (Last, First, Middle Initial)

Cheryl A. Rust

Mailing Address Rt. 1, Box 375

City  
Buffalo

State  
WV

Zip Code  
25033

Purpose of Disbursement  
employee - staff

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15636

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 24 / 2009

Amount of Each Disbursement this Period

426.99

C.

Full Name (Last, First, Middle Initial)

Skaff Family Limited Partnership

Mailing Address 2809 Ranch Road

City  
South Charleston

State  
WV

Zip Code  
25303

Purpose of Disbursement  
HQ - rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.15635

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 / 20 / 2009

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2038.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

Suddenlink

Mailing Address P.O. Box 742529

City  
Cincinnati,

State  
OH

Zip Code  
45274

Purpose of Disbursement  
HQ - internet / cable services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15639

Date of Disbursement

/   /

Amount of Each Disbursement this Period

220.63

**B.**

Full Name (Last, First, Middle Initial)

TGRAPHICS

Mailing Address 312 Buchanan Street

City  
Charleston

State  
WV

Zip Code  
25302

Purpose of Disbursement  
t-shirts for pig roast

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

416.16

**C.**

Full Name (Last, First, Middle Initial)

Tuesday Associates

Mailing Address 42 Capen Street

City  
Stoughton

State  
MA

Zip Code  
02072

Purpose of Disbursement  
Direct Mail-creative, printing, postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.15641

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2095.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2731.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Unemployment Compensation Division / WORKFORCE WV	<b>Transaction ID:</b> SB21B.15643 <b>Date of Disbursement</b>
Mailing Address Post Office Box 106	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City Charlesotn State WV Zip Code 25321	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement state unemployment taxes - 2nd quarter Candidate Name	<div> <div>320.37</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) United States Treasury	<b>Transaction ID:</b> SB21B.15645 <b>Date of Disbursement</b>
Mailing Address Internal Revenue Service	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 9</div> </div>
City Ogden State UT Zip Code 84201-0039	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement federal employment taxes - 2nd quarter Candidate Name	<div> <div>2610.42</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Wal-Mart~	<b>Transaction ID:</b> SB21B.15662 <b>Date of Disbursement</b>
Mailing Address 2700 Mountaineer Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 9</div> </div>
City Charleston State WV Zip Code 25309	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Underwood pig roast food/supplies - reimbursable to WVGOP Candidate Name	<div> <div>316.48</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**3247.27**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Wal-Mart~</p> <p>Mailing Address 2700 Mountaineer Blvd</p> <p>City Charleston State WV Zip Code 25309</p> <p>Purpose of Disbursement Underwood interns - ink cartridges and door prizes for Summit - ipod and gift card</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.15666</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="140.07"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) West Virginia State Tax Department</p> <p>Mailing Address Internal Auditing Division P.O. Box 1985</p> <p>City Charleston State WV Zip Code 25327-1985</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.15650</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) West Virginia State Tax Department</p> <p>Mailing Address Internal Auditing Division P.O. Box 1985</p> <p>City Charleston State WV Zip Code 25327-1985</p> <p>Purpose of Disbursement state withholding tax - June 09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.15667</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="156.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**326.07**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial)  
William Currey c/o Currey Real Estate

Mailing Address 5 Greenbrier Street

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
deposit for potential lease space

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15629

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
W. Shane Wilson

Mailing Address 12910 Ohio Avenue

City Charleston State WV Zip Code 25315

Purpose of Disbursement  
Underwood Institute director fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15815

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
W. Shane Wilson

Mailing Address 12910 Ohio Avenue

City Charleston State WV Zip Code 25315

Purpose of Disbursement  
reimbursable expenses-intern lunch with Cecelia Baker, ink cartridge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

142.55

**SUBTOTAL** of Disbursements This Page (optional) .....

1642.55

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 54

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.**

Full Name (Last, First, Middle Initial)

W. Shane Wilson

Mailing Address 12910 Ohio Avenue

City  
Charleston

State  
WV

Zip Code  
25315

Purpose of Disbursement  
Underwood Institute Director fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**B.**

Full Name (Last, First, Middle Initial)

W. Shane Wilson

Mailing Address 12910 Ohio Avenue

City  
Charleston

State  
WV

Zip Code  
25315

Purpose of Disbursement  
Underwood Institute Director fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.15830

Date of Disbursement

/   /

Amount of Each Disbursement this Period

650.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1450.00

**TOTAL** This Period (last page this line number only) .....

19321.14

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 42 / 54

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AC Express, Inc.

Nature of Debt (Purpose):  
Travel expense for speaker  
for conventio

Mailing Address 1150 Airport Road

City State ZIP Code  
Fairmont WV 26554

Outstanding Balance Beginning This Period

4214.56

Transaction ID: SD10.13223

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4214.56

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Alltell

Nature of Debt (Purpose):  
Victory Cell Bill from 4/-  
1/05

Mailing Address Bldg. 4 2nd Floor

City State ZIP Code  
Little Rock AR 72202

Outstanding Balance Beginning This Period

8653.10

Transaction ID: SD10.12941

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8653.10

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BJW Printing & Office Supplies

Nature of Debt (Purpose):  
printing from 11/19/04

Mailing Address 3100 Robert Byrd Drive

City State ZIP Code  
Beckley WV 25802

Outstanding Balance Beginning This Period

337.62

Transaction ID: SD10.12943

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

337.62

1) **SUBTOTALS** This Period This Page (optional).....

13205.28

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**B.** Form/Schedule : **SD10**  
Transaction ID : **SD10.12941**

After multiple phone calls with multiple Alltell representatives, Kevin in the Financial Services informed us that this account was written off as of May 2005 and it is now out of statute for collection. It is not possible to pay Alltell the \$8653.10. We will be requesting permission from the Federal Election Commission to write off this balance.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 44 / 54

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BJW Printing & Office SuppliesNature of Debt (Purpose):  
Interest

Mailing Address 3100 Robert Byrd Drive

City State ZIP Code  
Beckley WV 25802

Outstanding Balance Beginning This Period

291.15

Transaction ID: SD10.12945

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

291.15

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cellular One/ A R SystemsNature of Debt (Purpose):  
Cell Phone Bill from 4/1/-  
05

Mailing Address P.O. Box 80766

City State ZIP Code  
Valley Forge PA 19484

Outstanding Balance Beginning This Period

1057.45

Transaction ID: SD10.12946

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1057.45

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Christine McNalleyNature of Debt (Purpose):  
election contract consult-  
ing-from 4/1/05

Mailing Address 44 Regent Court

City State ZIP Code  
Swansea MA 02777

Outstanding Balance Beginning This Period

2400.00

Transaction ID: SD10.12926

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2400.00

1) **SUBTOTALS** This Period This Page (optional).....

3748.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

C. Form/Schedule : **SD10**  
Transaction ID : **SD10.12926**

Christine A. McNally did not provide proof of Claim for this bill. Therefore, we will request permission from the Federal Election Commission to write off this debt.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Dennie Data CommNature of Debt (Purpose):  
past due bill from 10/30/-  
04

Mailing Address 1339 Smith Street

City State ZIP Code  
Charleston WV 25301

Outstanding Balance Beginning This Period

428.32

Transaction ID: SD10.12948

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

428.32

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Feather Larson Synhorst-DCINature of Debt (Purpose):  
fundraising calls from 10-  
/31/2004

Mailing Address 7320 N Dreamy Draw Drive

City State ZIP Code  
Phoenix AZ 85020

Outstanding Balance Beginning This Period

7119.20

Transaction ID: SD10.12917

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7119.20

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Fibernet-CharlestonNature of Debt (Purpose):  
Phones for 110 Capitol St.  
Office

Mailing Address 211 Leon Sullivan Way

City State ZIP Code  
Charleston WV 25301

Outstanding Balance Beginning This Period

1744.90

Transaction ID: SD10.12918

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1744.90

1) **SUBTOTALS** This Period This Page (optional).....

9292.42

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**B.** Form/Schedule : **SD10**  
Transaction ID : **SD10.12917**

Doug McKinney spoke with Mark Trant concerning the WV Republican State Executive Committee Account. Mr. Trant informed us that they had previously done a balance adjustment and the balance was at zero. We will request permission from the Federal Election Commission to write off this balance.

**C.** Form/Schedule : **SD10**  
Transaction ID : **SD10.12918**

Incorrected debt was previously listed. The actual amount owed to Fibernet is \$1744.90. This is based on communication with Fibernet. This memo was entered 9/14/05. 1/11/2008 After phone conversations with multiple customer service agents, there were no balances owed to Fibernt by the WV Republican State Executive Committee of the Victory Campaign. We will request permission from the Federal Election Commission to write off this balance.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 48 / 54

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Fibernet-CharlestonNature of Debt (Purpose):  
Victory Field Office Phone  
Acct.26417

Mailing Address 211 Leon Sullivan Way

City State ZIP Code  
Charleston WV 25301

Outstanding Balance Beginning This Period

872.87

Transaction ID: SD10.12920

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

872.87

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Komax Business SystemsNature of Debt (Purpose):  
copier service and parts  
past due 10/04

Mailing Address 500 D Street

City State ZIP Code  
South Charleston WV 25303

Outstanding Balance Beginning This Period

1960.01

Transaction ID: SD10.12923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1960.01

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Komax Business SystemsNature of Debt (Purpose):  
Incorrect Debt Previouslly  
Reported7/05

Mailing Address 500 D Street

City State ZIP Code  
South Charleston WV 25303

Outstanding Balance Beginning This Period

1.95

Transaction ID: SD10.12925

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.95

**1) SUBTOTALS** This Period This Page (optional).....

2834.83

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



A. Form/Schedule : **SD10**  
Transaction ID : **SD10.12920**

Incorrect debt was previoulsy listed. The actual amount owed to Fibernet is \$872.87. This is based on communication with Fibernet. This memo was entered 9/14/2005. 1/11/2008 After phone conversations with multiple customer service agents, there were no balances owed to Fibernet by the WV Republican State Executive Committee or the Victory Campaign. We will request permission from the Federal Election Commission to write off this balance.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Regional Distributing CenterNature of Debt (Purpose):  
Toner and cartridge from  
4/1/05

Mailing Address 872 S. Milwaukee Avenue #293

City State ZIP Code  
Libertyville IL 60048

Outstanding Balance Beginning This Period

369.85

Transaction ID: SD10.12928

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

369.85

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic FundraisingNature of Debt (Purpose):  
fundraising services from  
11/15/04

Mailing Address 7591 9th Street North

City State ZIP Code  
Oakdale MN 55128

Outstanding Balance Beginning This Period

5411.86

Transaction ID: SD10.12930

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5411.86

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic FundraisingNature of Debt (Purpose):  
Interest from 7/31/05

Mailing Address 7591 9th Street North

City State ZIP Code  
Oakdale MN 55128

Outstanding Balance Beginning This Period

135.77

Transaction ID: SD10.12932

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.77

1) **SUBTOTALS** This Period This Page (optional).....

5917.48

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

A. Form/Schedule : **SD10**  
Transaction ID : **SD10.12928**

A check in the amount of \$369.85 was sent to Regional Distributing Center. The check was returned as not deliverable and unable to forward. We have been unable to locate this company. We will request permission from the Federal Election Commission to write off this debt as unpayable.

B. Form/Schedule : **SD10**  
Transaction ID : **SD10.12930**

This debt balance is the balance after a payment 7500.00 on 1/10/08. The original debt was 12911.86.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic FundraisingNature of Debt (Purpose):  
interest per Statement Su-  
mmary today 1/08

Mailing Address 7591 9th Street North

City State ZIP Code  
Oakdale MN 55128

Outstanding Balance Beginning This Period

689.32

Transaction ID: SD10.12933

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

689.32

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Strategic TelecommunicationsNature of Debt (Purpose):  
Interest on Strategic Fun-  
draising

Mailing Address 7591 9th Street North

City State ZIP Code  
Oakdale MN 55128

Outstanding Balance Beginning This Period

1639.49

Transaction ID: SD10.12934

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1639.49

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TCS Technology ServiceNature of Debt (Purpose):  
Computer Rental from 9/30-  
/2004

Mailing Address 4430 Kanawha Turnpike Suite B

City State ZIP Code  
South Charleston WV 25309

Outstanding Balance Beginning This Period

506.32

Transaction ID: SD10.12936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

506.32

1) **SUBTOTALS** This Period This Page (optional).....

2835.13

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 53 / 54

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TCS Technology ServiceNature of Debt (Purpose):  
Computer Rental from 10/3-  
0/2004

Mailing Address 4430 Kanawha Turnpike Suite B

City State ZIP Code  
South Charleston WV 25309

Outstanding Balance Beginning This Period

927.31

Transaction ID: SD10.12938

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

927.31

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Tiffany GibsonNature of Debt (Purpose):  
Contract labor and expenses  
from 10/30/04

Mailing Address P.O. Box 425

City State ZIP Code  
Parkersburg WV 26101

Outstanding Balance Beginning This Period

1030.95

Transaction ID: SD10.12921

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1030.95

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Time Warner CableNature of Debt (Purpose):  
Victory Field Office cable  
bill from 4/05

Mailing Address P.O. Box 580485

City State ZIP Code  
Charlotte NC 28258

Outstanding Balance Beginning This Period

135.00

Transaction ID: SD10.12939

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.00

1) **SUBTOTALS** This Period This Page (optional).....

2093.26

2) **TOTALS** This Period (last page this line number only).....

39927.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

39927.00

**B.** Form/Schedule : **SD10**  
Transaction ID : **SD10.12921**

A check for \$1030.95 was sent to Tiffany Gibson at her last known address on January 10, 2008. The check was returned unclaimed and unable to forward. We have been unable to locate Tiffany Gibson. We will request permission from the Federal Election Commission to write off this debt as unpayable.

**C.** Form/Schedule : **SD10**  
Transaction ID : **SD10.12939**

Doris Elliott of Time Warner Cable searched all records for the West Virginia Republican State Executive Committee under any possible name and was unable to locate a bill due Time Warner Cable for \$13-5.00. Without a physical address, which we do not have record of, there is no way to find this bill and pay this bill. We will request permission from the Federal Election Commission to write this bill off.